

CITY OF SAINT PAUL

Business Licensing 375 Jackson Street, Suite 220 Saint Paul, Minnesota 55101-1806

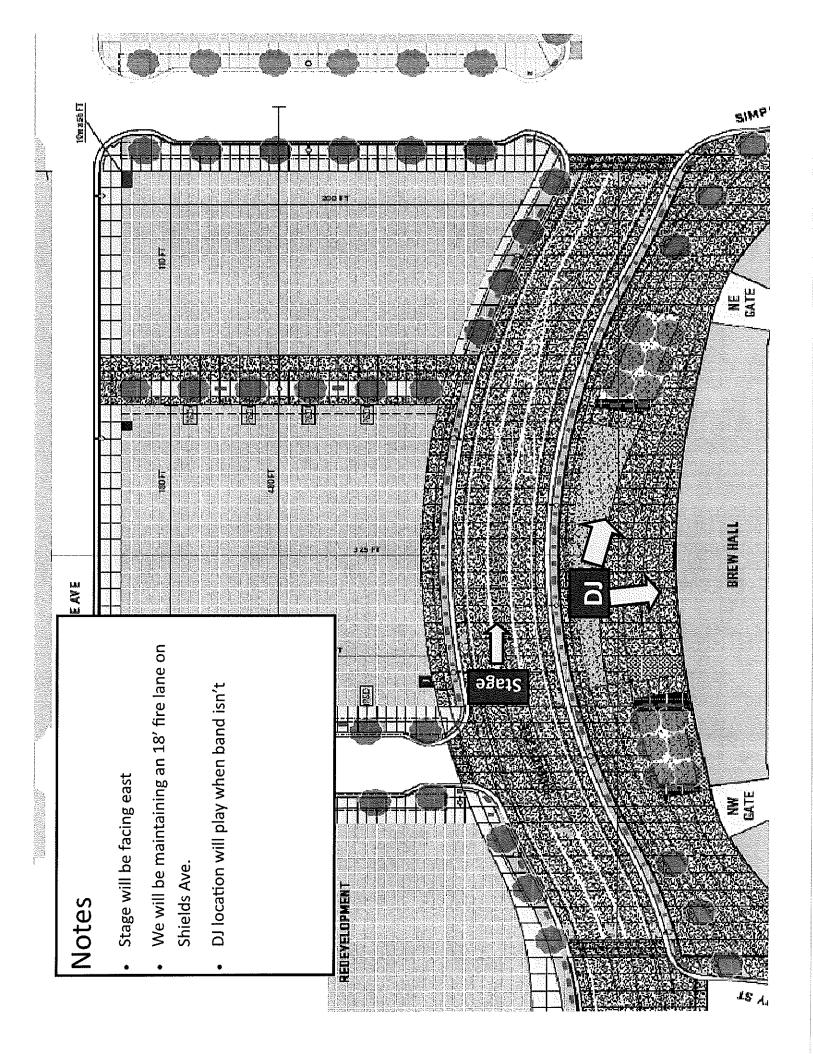
Telephone: 651-266-8989 Facsimile: 651-266-9124 Web: www.stpaul.gov/dsi

## **Sound Level Variance Application**

Legislative Code Chapter 293. - Noise Regulations

Application and \$175 fee payment should be submitted a minimum of sixty (60) days prior to the scheduled event start date. A public notification period is required prior to scheduling the application's Public Hearing before the Saint Paul City Council. Applications received fewer than sixty (60) days prior to the event may not satisfy the ordinance's processing timelines for placement on the Council's agenda.

1. Organization/person seeking variance, winness	ota United FC/ Amanz Field	
2. Event Name: MNUFC v Philadelphia Union - MLS Re	egular Season	
3. Address and physical description of noise sour	rce location (Event, Worksite):	AND THE RESIDENCE AND THE PARTY OF THE PARTY
400 Snelling Ave. North - St. Paul, MN 55104		
4. Responsible person: Zacharia Litzelswope	Title: Director, Events & G	uest Experience
5. Telephone: 612-928-6406	E-Mail: zacharia.l@mnufc.com	- The second section of the section
6. Date(s) variance requested: Wednesday, Octobe	er 20, 2021	
7. Noise source - Time(s) of operation: 4:30PM - 7	:00PM	
- Time(s) of pre-event sound che	eck: 3:30PM	
8. Sound level requested (dBA/Decibels): 95 dBA_		
9. Mailing address w/zip code: 400 Snelling Ave. No	orth - St. Paul, MN 55104	
10. Briefly describe the noise source and equipme	ent involved: Band Stage with speaker s	ound wings placed on Shields
Ave. and/or a DJ setup with stand speakers inside of the	Beer Garden on the Brew Hall patio	
11. Describe the steps that will be taken to minim	ize the noise levels: Every effort will b	e made to aim speakers away
from residential areas and towards the stadium		
12. State reason for seeking variance (example - n	nusic, announcements, construction	n, etc.): MLS Soccer Game
13. Maximum number of attendees: 19,600		
14. Describe steps that will be taken to prevent Co	OVID-19 virus spread: We will follow	all State and Local guidance as
well as highly encourage mask wearing for non-vaccinate		
15. A site diagram & map must be attached show	ing location of noise source(s), stree	ets, stages, tents, etc. (If
there will be amplified sound, indicate location a	nd direction that all speakers will be	e facing).
NOTE: Multiple locations may require mo	ore than one application.	
16. Submit completed application, site diagram/n	nap, and \$175.00 fee to:	
CITY OF SAINT PAUL		
DEPARTMENT OF SAFETY AND INSPECTIONS		
375 JACKSON STREET, SUITE 220		
SAINT PAUL, MN 55101-1806		
I understand that any social gathering associate applicable Governor Walz COVID-19 orders relat		
Signature of responsible person: <u>Jacharia</u>	Litzelswops	Date: <u>07/20/21</u>
AA	-ADA-EEO Employer	April 202





## **DSI RECEIPT**

CITY OF SAINT PAUL

Department of Safety and Inspections 375 Jackson Street Suite 220 Saint Paul, Minnesota 55101-1806 Phone: (651) 266-8989 Fax: (651) 266-9124 www.stpaul.gov/dsi

Date: 07/22/2021

Received From: ZACHARIA LITZELSWOPE dba: MINNESOTA UNITED FC

400 SNELLING AVE N ST PAUL MN 55104

Description:

Invoice Details Invoice Amount Paid

1110128

Noise Variance \$175.00 \$175.00

TOTAL AMOUNT PAID: \$175.00

Paid By:

Payment Type	Check #	Received Date	Amount
Credit Card	V4511	07/22/2021	\$175.00